For help completing Form 1, please double-click the (i) icon next to each line number. RECEIVED MAIL CENTER

	FEC FORM 1	STATEMENT OF ORGANIZATION	2017 FEB 13 AM 9: 14
)	NAME OF COMMITTEE (in	(Check if name Example:If typing, type is changed) over the lines.	12FE4M5
	Boyd Rob	perts for Congress	
	ADDRESS (number a	237 San Joaquin Street	
	(Check if a is changed		CA 92651
		CITY	STATE ZIP CODE
	_	AIL ADDRESS (Please provide only one e-mail address) Boyd GalleryRE@gmail.co address ed)	<u>)m</u>
	COMMITTEE'S WEE		com.
v)	2. DATE	2 2017	
v))	3. FEC IDENTIFI	CATION NUMBER	
þ))	4. IS THIS STATE	MENT NEW (N) OR AMENDED (A)	
	I certify that I have	examined this Statement and to the best of my knowledge and belief in	t is true, correct and complete.
	Type or Print Name	of Treasurer Boyd Roberts	
	Signature of Treasu	rer fyd fl	Date 02 / 01° / 2017
	NOTE: Submission of	f false, erroneous, or incomplete information may subject the person signing	

Office Use Only		For further information contact: Federal Election Commission Toll Free 800-424-9530	FEC FORM 1 (Revised 02/2009)

	FEC Fo	orm 1 (Revised 02/2009)	Page 2
. TYP	E OF C	COMMITTEE	
Can	didate	e Committee:	
(a)	\boxtimes	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	the candidate
Nam Can	e of didate	Boyd Roberts	
	didate y Affiliati		State CA District 48
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Can	e of didate		
Par	ty Con	mmittee:	
(d)			nocratic, ublican, etc.) Party
Pol	itical A	Action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ed organization is a
		Corporation Corporation w/o Capital Stock	bor Organization
		Membership Organization Trade Association	ooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segrecommittee. (i.e., nonconnected committee)	gated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joir	nt Fund	draising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Con	mmittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number C	·····
	4.		

_	FEC Form 1 (Revised	02/2009)	Page 3
١	Write or Type Committee Name	•	
)) 6 .	Name of Any Connected (Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	nip PAC Sponsor
L			
L			
	Mailing Address		
		CITY STATE	ZIP CODE
	Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Representative Lea	adership PAC Sponso
			
7.	Custodian of Records: Ide books and records.	ntify by name, address (phone number optional) and position of the person in pos	session of committe
	Full Name Boyd	Lachlan Roberts	1 ; 1] [] ;
	Mailing Address	237 Şan Joaquin Street	l
	W		
		Laguna Beach	1 -
	Title or Position	CITY STATE	ZIP CODE
	_i Candidate		63, _{I=1} 9152 ,
8.	Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the nai assistant treasurer).	me and address of
	Full Name of Treasurer	Lachlan Roberts	1 1 1 1 1 1
	Mailing Address	237 Şan Joaquin Street	
	-		
		Laguna Beach CA 9265	1
	Title or Position	CITY STATE	ZIP CODE
	Candidate/Treasur	er Telephone number [949] - [46	3, - 9152

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	·		
Full Name of			
Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position			
	1 1 1 1 1 1 1 1 1 1 1 1 1 1	Telephone number]-[
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SANTA MINA CA 926

ON FEB 2007 FM 10

2017 FB 5 0) Election Federal

999 E. Street,

Washington Pc

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Date of Receipt Received from Senate Public Records Office	
Date of Receipt Received from Electronic Filing Office	
Other (Specify):]
2/13/17	
PREPARER DATE PREPARE (3/2015)	